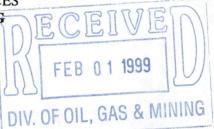
STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES

DIVISION OF OIL, GAS AND MINING

1594 West North Temple - Suite 1210 Box 145801

Salt Lake City, Utah 84114-5801 Telephone: (801) 538-5291

Fax: (801) 359-3940



ANNUAL REPORT OF MINING OPERATIONS

The informational requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1953, as amended, and the General Rules as promulgated under the Utah Minerals Regulatory Program. An operator conducting mining operations under a Notice of Intention must file an annual operations and progress report (FORM MR-AR) with the Division.

| 1. | Genera | al Information | | |
|-----|--------------|---|--|--|
| | 1. | Report Time Period: From (mo./yr.) To (mo./yr.) 12/98 | | |
| | 2. | DOGM File Number (Mine No): S / 015 / 052 | | |
| | 3. | Mine Name: Co-op Placer | | |
| | 4. | Mineral(s) Mined (or permitted to mine):medicinal mineral | | |
| | 5. | Type of mine Surface Mine or □ Underground Mine | | |
| | 6. | Legal Description (Location of Lands Affected): | | |
| | | | | |
| | | $NE_{1/4}$, $1/4$, $1/4$, $1/4$, Section 3 , Township $23S$, Range $6E$ | | |
| | | $\frac{NW_1}{SE_4}$ 1/4, $\frac{1}{4}$, $\frac{1}{4}$, Section $\frac{3}{4}$, Township $\frac{23S}{23S}$, Range $\frac{6E}{6E}$ | | |
| 7. | Name | of Operator or Company: Bill W. Stoddård | | |
| | 8. | Permanent Street Address: c/o Carl E. Kingston | | |
| | | City, State, Zip: 3212 South State Street | | |
| | | Phone: Salt Lake City, Utah 84115 (801) 486-1458 | | |
| | 9. | Company Representative (or designated operator): | | |
| | | Name: Bill W. Stoddard | | |
| | | Title:co-owner | | |
| | | Business Address: P. O. Box 300 | | |
| | | City, State, Zip: Huntington, Utah 84528 | | |
| | | Phone: (435) 687-2777 | | |
| | | ☐ Please check if any of the above information has changed since previous year. | | |
| II. | <u>Minin</u> | g and Reclamation | | |
| | 1. | Was there any mine related activity during the past year? Yes ☒ No ☐ | | |
| | 2. | 2. If no - what was the last year of activity?approximately two ten | | |
| | 3. | If yes - how much ore or mineral was mined? approximately two tons | | |

| 4. | Briefly describe the type of work performer additional surface disturbances that | ormed, volume of material moved, and any new | |
|----------------------|---|--|--|
| | | erial was removed, roads were graded. | |
| | No new surface disturbances occurred. | | |
| | | | |
| | | | |
| 5. | How much additional acreage was dis | sturbed during the past year? none | |
| 6. | How much acreage was reclaimed dur | ring the past year?none | |
| 7. | Briefly describe the reclamation work should include methods employed, and none | performed during the past year. This description an evaluation of the results. | |
| | | | |
| | | | |
| 8. | What is the <u>total</u> disturbed acreage of | f entire project at years end? less than one ac | |
| 0 | 9. Briefly summarize any mining and/or reclamation plans for the upcoming year. The road will be graded and additional material, up to five tons | | |
| 9. | | | |
| | may be removed | | |
| | | | |
| | | | |
| NOTE: | Section III., "Additional Information" | applies only to large mining operations. | |
| III. Additional | Information | | |
| 1. | 1. An updated surface facilities map should be attached if there have been significant the previous map was submitted. | | |
| 2. | Any monitoring results or other reports the of intention should also be attached. | at are required under the terms of the approved notice | |
| IV. Signature | e Requirement | | |
| I here | eby certify that the foregoing is tru | e and correct. | |
| | Name (Typed or Print): | Bill W. Stoddard | |
| | Title of Operator: | co-owner | |
| | Signature of Operator: | Bill to Staddard | |
| | Date: | 1-27-99 | |
| jb a:\forms\MR-AR | | | |

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